



Future Directions in Access and Equity Health Services Research

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Research Orientation

Design and conduct research that:

- Takes full advantage of the unique opportunities to study equity in the VA “laboratory”
- Embraces the challenge of having innovative findings with high impact on policy and practice
- Aligns with transformational priorities and performance measures

What We Have Been Working On

- Reconfigured review groups
- Reworked scoring criteria
 - Emphasis on innovation and impact
- Revised Priorities for 2011
 - Draft currently in review

Review Groups

- **Medical Care and Clinical Management**
 - Medical/surgical management; provider preferences & behaviors; diagnosis; prognosis; pharmacotherapeutics
- **Determinants of Patient Response to Care**
 - Patient preferences, perceptions and self care; illness response, coping, personal, sociodemographic & cultural factors; decision-making; adherence, family and support structures; patient-provider interactions & communication; contextual and community factors
- **Informatics & Research Methods Development**
- **Mental and Behavioral Health**
- **Healthcare System Organization & Delivery**
- **Post-acute and Long-term Care**
 - Rehabilitation; functional outcomes; Geriatrics; community based care; care giving; long-term care; end of life care

Aims Going Forward

- Strengthen connection of research to system and stakeholder needs
- Improve coordination of related research projects
- Improve attention to implementation throughout research process
- Increase ability to respond to evolving issues

Priorities FY 11 -DRAFT

Interventional Studies on Access to Care for Rural and Vulnerable Populations

Studies focusing on merely documenting variations in access are not encouraged unless the research is framed so that the findings are likely to be actionable or contribute directly to possible interventions...common approaches to improving access for rural populations (such as telehealth interventions) should clearly explain how the proposed research will add substantially to the existing body of knowledge about the intervention, its implementation, or the outcomes.

Priorities FY 11 -DRAFT

Interventional Studies to Reduce Racial and Ethnic Minority Health Care Disparities

HSR&D has a special interest in studies that develop and test interventions which promote equitable health care services and health outcomes for all Veterans. Studies focusing on merely documenting racial and ethnic disparities are not encouraged unless the research is framed so that the findings are likely to be actionable.

Priorities FY 11 -DRAFT

HSR&D has a special interest in research that results in important innovations...Please note: we do not encourage studies that seek to add incrementally to our knowledge by applying a well-established intervention, approach or method to a new target condition, data set or population , unless there is a compelling justification that the work will substantially expand the body of scientific knowledge, inform important programmatic decisions or increase our understanding of underlying models or mechanisms.

Priorities FY 11 -DRAFT

When research ...findings are likely to have direct implications for specific clinical or operational program offices, proposals should indicate that the office has been engaged (where appropriate) or that the investigator has thought carefully about how the research aligns with current program priorities and whether any interventions being studied are feasible. Particular attention should be given to support the sustainability of novel applications after the research project has ended. Finally, researchers are encouraged to include consideration of implementation whenever possible.

New Funding Mechanism

- **CREATE – Collaborative Research to Enhance and Advance Transformation and Effectiveness**
 - Addresses topic of high-priority to system
 - Integrated set of (multi-center) proposals
 - Strong input of stakeholder into focus and design
 - Out-year projects adapt to findings of initial years
- **Details mid- FY ‘11**

Conclusions

- We can contribute to a profound understanding access and the impact of equity on the health and healthcare of Veterans
- The system needs and wants to be informed by research and to engage the expertise of health services researchers